

APPLICATION FORM
SAGE III SOLAR Summer Teacher Workshop
June 22-27, 2003

Personal Information

Name: _____ SSN: _____ US citizen: ☐ YES ☐ NO

School: _____

School address: _____

City: _____ State: _____ Zipcode: _____

School telephone: _____ Fax: _____ Email: _____

Subject(s)/Grade currently teaching: _____

Number years teaching: _____ Areas of certification: _____

Home address: _____

City: _____ State: _____ Zipcode: _____

Home telephone: _____ Home email: _____

College/University Information

Undergraduate Institution: _____ City, State: _____

Major(s): _____ Minor: _____ Year: _____

Graduate Institution(s): _____

Degree(s): _____ Major(s): _____ Year: _____

Additional graduate credits: _____

Give a brief summary of your experience conducting teacher workshops or presenting papers or talks at conference or meetings during the last three years.

Additional Information Required

1. Obtain a letter of recommendation from one person, selected from the following: department head, principal, science supervisor, or superintendent.
2. Attach a brief summary of the classes you teach. Also include a brief discussion of why you think you should be considered as a participant for the SOLAR Workshop and how your students will benefit from your experience.
3. These letters may be mailed to the Application Office separately, but must meet the postmark deadline of May 1, 2003.
4. Provide the name, position and phone number of a person whom we may contact to verify current employment.

_____ Name	_____ Position	_____ Phone Number
---------------	-------------------	-----------------------

5. Are you currently registered as a SOLAR participant? ☐ YES ☐ NO

Completion of this section is voluntary. Participants will be selected on merit, not race or gender. This information is used to determine how well the program serves all segments of the diverse population.

Race:

Gender:

☐ Caucasian

☐ Asian American

☐ Male

☐ African American

☐ Hispanic

☐ Female

☐ Native American

☐ Other: _____

All application materials should be mailed to the address below. Application materials cannot be returned. Applications must be postmarked no later than May 1, 2003.

Susan Walters
Mail Stop 475
NASA Langley Research Center
Hampton VA 23681

If you have any questions or need any additional information contact Susan Walters at:
s.c.walters@larc.nasa.gov
phone: 757-864-5879
fax: 757-864-2671